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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>		<b>Attorney Docket No.</b> SIL.P0067	
		<b>First Inventor</b> Timothy J. Dupuis	
		<b>Title</b> ABSOLUTE POWER DETECTOR	
		<b>Express Mail Label No.</b> EO 901 656 781 US	

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>	<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
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1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>60</u> ] (w/ cover) <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>20</u> ] 5. Oath or Declaration [Total Pages <u>2</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 17 completed)</i> i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Other: .....
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17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:


☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 10/097,162

Prior application information: Examiner SHINGLETON, MICHAEL B Group / Art Unit: 2817

**For CONTINUATION OR DIVISIONAL APPS only:** The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**18. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	 <b>30163</b>	or <input type="checkbox"/> Correspondence address below
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PATENT TRADEMARK OFFICE	
Name	
Address	
City	State Zip Code
Country	Telephone 512-301-9900 Fax 512-301-9915

Name (Print/Type)	Bruce A. Johnson	Registration No. (Attorney/Agent)	37361
Signature			Date 9/29/03

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Box Patent Application, PO Box 1450, Alexandria, VA 22313-1450.

18304 U.S. PTO  
09/29/03

PTO/SB/17 (09-00)

Approved for use through 10/31/2002. OMB 0651-0032

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number	TBD
Filing Date	9/29/2003
First Named Inventor	Timothy J. Dupuis
Examiner Name	SHINGLETON, MICHAEL B
Group Art Unit	2817
Attorney Docket No.	SIL.P0067

TOTAL AMOUNT OF PAYMENT \$ 750.00

## METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐ Applicant claims small entity status. See 37 CFR 1.27

☒ Payment Enclosed:

- ☐ Check ☒ Credit Card ☐ Money Order ☐ Other

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	750	201	375	Utility filing fee	\$750
106	330	206	165	Design filing fee	
107	490	207	245	Plant filing fee	
108	750	208	375	Reissue filing fee	
114	160	214	80	Provisional filing fee	
SUBTOTAL (1)					\$ 750.00

### 2. EXTRA CLAIM FEES

					Fee from below	Fee Paid
Total Claims	20	-20**=	0	X	\$18	= \$0.00
Independent Claims	2	-3**=	0	X	\$84	= \$0.00
Multiple Dependent						-
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description		
103	18	203	9	Claims in excess of 20		
102	84	202	42	Independent claims in excess of 3		
104	270	204	135	Multiple dependent claim, if not paid		
109	80	209	40	** Reissue independent claims over original patent		
110	18	210	9	** Reissue claims in excess of 20 and over original patent		
SUBTOTAL (2)						\$0.00

### 3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge - late filing fee or oath	\$0
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	\$0
139	130	139	130	Non-English specification	\$0
147	2,520	147	2,520	For filing a request for ex parte reexamination	\$0
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	\$0
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	\$0
115	110	215	55	Extension for reply within first month	\$0
116	410	216	205	Extension for reply within second month	\$0
117	890	217	446	Extension for reply within third month	\$0
118	1,390	218	695	Extension for reply within fourth month	\$0
128	1,890	228	945	Extension for reply within fifth month	\$0
119	310	219	155	Notice of Appeal	\$0
120	310	220	155	Filing a brief in support of an appeal	\$0
121	270	221	135	Request for oral hearing	\$0
138	1,510	138	1,510	Petition to institute a public use proceeding	\$0
140	110	240	55	Petition to revive - unavoidable	\$0
141	1,240	241	620	Petition to revive - unintentional	\$0
142	1,240	242	620	Utility issue fee (or reissue)	\$0
143	440	243	220	Design issue fee	\$0
144	600	244	300	Plant issue fee	\$0
122	130	122	130	Petitions to the Commissioner	\$0
123	50	123	50	Petitions related to provisional applications	\$0
126	240	126	240	Submission of Information Disclosure Stmt	\$0
581	40	581	40	Recording each patent assignment per property (times number of properties)	\$0
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	\$0
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(h))	\$0
179	710	279	355	Request for Continued Examination (RCE)	\$0
169	900	169	900	Request for expedited examination of a design application	\$0
Other fee (specify)					\$0
* Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					\$0.00

## SUBMITTED BY

Name (Print/Type)	Bruce A. Johnson	Registration No. (Attorney/Agent)	37361	Telephone	512-301-9900
Signature		Date	9/29/03		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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